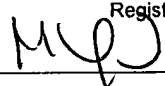
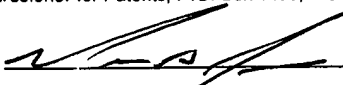


|                                                                                                                                                                                                                                                                                                                              |                                  |                                                 |                         |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|-------------------------------------------------|-------------------------|
| <b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)<br/>FY 2005</b><br>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)                                                                                                                                                                         |                                  | <b>Docket Number (Optional)</b><br>393032041800 |                         |
| Application Number 10/712,687                                                                                                                                                                                                                                                                                                |                                  | Filed November 12, 2003                         |                         |
| For <b>CURSOR MOVEMENT CONTROLLING APPARATUS FOR ELECTRONIC MUSICAL APPARATUS</b>                                                                                                                                                                                                                                            |                                  |                                                 |                         |
| Art Unit 2837                                                                                                                                                                                                                                                                                                                |                                  | Examiner Jianchun Qin                           |                         |
| This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.<br>The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):                                                                    |                                  |                                                 |                         |
|                                                                                                                                                                                                                                                                                                                              |                                  | <u>Fee</u>                                      | <u>Small Entity Fee</u> |
| <input type="checkbox"/>                                                                                                                                                                                                                                                                                                     | One month (37 CFR 1.17(a)(1))    | \$120                                           | \$60                    |
| <input checked="" type="checkbox"/>                                                                                                                                                                                                                                                                                          | Two months (37 CFR 1.17(a)(2))   | \$450                                           | \$225                   |
| <input type="checkbox"/>                                                                                                                                                                                                                                                                                                     | Three months (37 CFR 1.17(a)(3)) | \$1020                                          | \$510                   |
| <input type="checkbox"/>                                                                                                                                                                                                                                                                                                     | Four months (37 CFR 1.17(a)(4))  | \$1590                                          | \$795                   |
| <input type="checkbox"/>                                                                                                                                                                                                                                                                                                     | Five months (37 CFR 1.17(a)(5))  | \$2160                                          | \$1080                  |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.                                                                                                                                                                                                                                              |                                  |                                                 |                         |
| <input type="checkbox"/> A check in the amount of the fee is enclosed.                                                                                                                                                                                                                                                       |                                  |                                                 |                         |
| <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.                                                                                                                                                                                                                                                  |                                  |                                                 |                         |
| <input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.                                                                                                                                                                                                   |                                  |                                                 |                         |
| <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>03-1952</u> <del>I have enclosed a duplicate copy of this sheet.</del> Fee Transmittal form (PTO/SB/17) is attached to this submission in duplicate. |                                  |                                                 |                         |
| I am the <input type="checkbox"/> applicant/inventor.                                                                                                                                                                                                                                                                        |                                  |                                                 |                         |
| <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71.<br>Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).                                                                                                                                                                        |                                  |                                                 |                         |
| <input type="checkbox"/> attorney or agent of record. Registration Number _____                                                                                                                                                                                                                                              |                                  |                                                 |                         |
| <input checked="" type="checkbox"/> attorney or agent under 37 CFR 1.34.<br>Registration number if acting under 37 CFR 1.34 <u>48,231</u>                                                                                                                                                                                    |                                  |                                                 |                         |
| <br>_____<br>Signature                                                                                                                                                                                                                    |                                  | _____<br>December 13, 2005<br>Date              |                         |
| _____<br>Mehran Arjomand<br>Typed or printed name                                                                                                                                                                                                                                                                            |                                  | _____<br>(213) 892-5630<br>Telephone Number     |                         |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.                                                                                                                        |                                  |                                                 |                         |
| <input type="checkbox"/> Total of <u>1</u> forms are submitted.                                                                                                                                                                                                                                                              |                                  |                                                 |                         |

|                                                                                                                                                                                                                                                                               |                                                                                                                 |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------|
| I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV644665164US, in an envelope addressed to: MS Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below. |                                                                                                                 |
| Dated: December 13, 2005                                                                                                                                                                                                                                                      | Signature:  (Marco Jimenez) |



Effective on 12/08/2004.  
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

## FEE TRANSMITTAL For FY 2005

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

(\$) 450.00

### Complete if Known

|                      |                   |
|----------------------|-------------------|
| Application Number   | 10/712,687        |
| Filing Date          | November 12, 2003 |
| First Named Inventor | Akihiro MIWA      |
| Examiner Name        | Jianchun Qin      |
| Art Unit             | 2837              |
| Attorney Docket No.  | 393032041800      |

### METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_  
☒ Deposit Account Deposit Account Number: 03-1952 Deposit Account Name: Morrison & Foerster LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee  
☒ Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

### FEE CALCULATION

#### 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

| Application Type | FILING FEES |                       | SEARCH FEES |                       | EXAMINATION FEES |                       | Fees Paid (\$) |
|------------------|-------------|-----------------------|-------------|-----------------------|------------------|-----------------------|----------------|
|                  | Fee (\$)    | Small Entity Fee (\$) | Fee (\$)    | Small Entity Fee (\$) | Fee (\$)         | Small Entity Fee (\$) |                |
| Utility          | 300         | 150                   | 500         | 250                   | 200              | 100                   |                |
| Design           | 200         | 100                   | 100         | 50                    | 130              | 65                    |                |
| Plant            | 200         | 100                   | 300         | 150                   | 160              | 80                    |                |
| Reissue          | 300         | 150                   | 500         | 250                   | 600              | 300                   |                |
| Provisional      | 200         | 100                   | 0           | 0                     | 0                | 0                     |                |

#### 2. EXCESS CLAIM FEES

| Fee Description                                    | Fee (\$) | Small Entity Fee (\$) |
|----------------------------------------------------|----------|-----------------------|
| Each claim over 20 (including Reissues)            | 50       | 25                    |
| Each independent claim over 3 (including Reissues) | 200      | 100                   |
| Multiple dependent claims                          | 360      | 180                   |

|                      |                     |                 |                      |                                      |
|----------------------|---------------------|-----------------|----------------------|--------------------------------------|
| <u>Total Claims</u>  | <u>Extra Claims</u> | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> | <u>Multiple Dependent Claims</u>     |
| 8                    | - 8 = 0             | x               | = 0                  | <u>Fee (\$)</u> <u>Fee Paid (\$)</u> |
|                      |                     |                 |                      | 0                                    |
| <u>Indep. Claims</u> | <u>Extra Claims</u> | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> |                                      |
| 3                    | - 3 = 0             | x               | = 0                  |                                      |

#### 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

|                     |                     |                                                         |                 |                      |
|---------------------|---------------------|---------------------------------------------------------|-----------------|----------------------|
| <u>Total Sheets</u> | <u>Extra Sheets</u> | <u>Number of each additional 50 or fraction thereof</u> | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> |
| - 100 =             | /50                 | (round up to a whole number) x                          | =               |                      |

#### 4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): 1252 Extension for response within second month 450.00

#### SUBMITTED BY

|                   |                 |                                   |                   |           |                |
|-------------------|-----------------|-----------------------------------|-------------------|-----------|----------------|
| Signature         |                 | Registration No. (Attorney/Agent) | 48,231            | Telephone | (213) 892-5630 |
| Name (Print/Type) | Mehran Arjomand | Date                              | December 13, 2005 |           |                |

Express Mail - EV644665164US